

CITY OF FRANKFORT FIRE DEPARTMENT  
BURNING PERMIT APPLICATION

\_\_\_\_\_  
Permit Number

\_\_\_\_\_  
Date

Name of Firm – Applicant \_\_\_\_\_

Address of Firm – Applicant \_\_\_\_\_

Location of Request Burning \_\_\_\_\_

Days of Requested Burning \_\_\_\_\_

Permit Fee \_\_\_\_\_

The applicant does hereby agree to accept any and all responsibility and liability of any injuries or damage to properties that may result from his/her burning process.

\_\_\_\_\_  
Applicant's Signature

\_\_\_\_\_  
Date